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APPLICANTS

Todd Campbell, Santa Rosa, CA;

\*\* CONTINUING DATA \*\*\*\*\*

> None

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>UU</i>		

ADDRESS

28390  
 MEDTRONIC VASCULAR, INC.  
 IP LEGAL DEPARTMENT  
 3576 UNOCAL PLACE  
 SANTA ROSA , CA  
 95403

TITLE

Stent assembly with therapeutic agent exterior banding

FILING FEE  RECEIVED 974	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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